DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

- (a) My residence, post office address and citizenship are as stated below next to my name.
- (b) I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

MICROSCOPE DRAPE LENS PROTECTIVE ASSEMBLY

the specificat (check one) [x	cion of which is attached hereto.		
]] was filed on		, as Application Serial No.
	, and was a	amended on	(if applicable).
(c) I hereby state specification, ir	e that I have reviewed ncluding the claims, as	and understand the cont amended by any amendme	tents of the above identified ent referred to above.
(d) I acknowledge defined in Title 3	the duty to disclose i 37, Code of Federal Reg	information which is mat gulations, §1.56.	terial to patentability as
any foreign applica identified below ar	ation(s) for patent or ny foreign application	inventor's certificate	nited States Code, §119 of (s) listed below and have also 's certificate having a filing d:
Prior Foreign Application(s)			Priority Claimed
(Number) (Country)		(Day/Month/Year fi	[] Yes [] No
(Number)	•	<u>-</u>	[] Yes [] No
(Number)	_	(Day/Month/Year fi	ode, §119 (e) or §120 of any
claims of this applorovided by the finaterial information octween the filing date of this applicate.	lication is not discloserst paragraph of Title on as defined in Title date of the prior application:	sed in the prior U.S. ap 35, U.S. Code, §112, I 37, Code of Federal Rep lication and the nation	ubject matter of each of the oplication in the manner acknowledge the duty to disclose gulations, §1.56 which occurred al or PCT international filing
(Application S	Ser. No.) (Filing I	Oate) (Status-patent	ed, pending, abandoned)
I hereby ar business in the Pat	ppoint the following at tent and Trademark Off	ttorney to prosecute thice connected therewith	is application and transact all :
	JOHN K. McCULLC	OCH - Reg. No. 17,452	
SEND CORRESPONDENC	CE TO:	DIRECT TELEPHO	NE CALLS TO:
McCulloch PLC		John K. McCul	loch
5291 Colony Driv Saginaw, Michiga	e North n 48603	(989) 792-250	0
statements made on statements were made punishable by fine	information and belie: de with the knowledge to or imprisonment, or bo willful false statemen	f are believed to be tr that willful false stat oth. under Section 1001	ledge are true and that all ue; and further that these ements and the like so made are of Title 18 of the United States validity of the application or
Signature Richa	ada Weave	₹ Signature	sigh M. Knight
Residence: Fento City, State, Zip: 1 Country: 1	rd A. Weaver n, Michigan USA Fenton, Michigan 48430 USA	Full Name: Jo Residence: Fe	ber 27, 2003 seph M. Wright nton, Michigan USA ip: Fenton, Michigan 48430 USA USA
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Date: Full Name: Nathan M. Sokolowski Residence: Fenton, Michigan USA Full Name: Residence: City, State, Zip: Fenton, Michigan 48430 City, State, Zip: Country: Country: USA USA Citizenship: Citizenship: P.O. Address: 14241 Fenton Road Fenton, Michigan 48430 P.O. Address: Signature_____ Signature___ Date: Date: Full Name: Full Name: Residence: Residence: City, State, Zip: City, State, Zip: Country: Country: Citizenship: Citizenship: P.O. Address: P.O. Address: Signature_____ Signature_____ Date: Full Name: Full Name: Residence: Residence: City, State, Zip: City, State, Zip: Country: Country: Citizenship: Citizenship: P.O. Address: P.O. Address: Signature _____ Signature___ Date: Full Name: Full Name: Residence: Residence: City, State, Zip: City, State, Zip: Country: Country: Citizenship: Citizenship: P.O. Address: P.O. Address: Signature_____ Signature_____ Date: Date: Full Name: Full Name: Residence: Residence: City, State, Zip: Country: City, State, Zip: Country: Citizenship: Citizenship: P.O. Address: P.O. Address: Signature_____ Signature_____ Date: Date: Full Name: Full Name: Residence: Residence: City, State, Zip: City, State, Zip: Country: Country: Citizenship:

Signature C

Citizenship:

P.O. Address:

October 27, 2003

Signature_____

P.O. Address: